

**Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions**

RECEIVED

A Public Document

1. Agency Name

City of San Jose		RECEIVED Date Stamp 2016 APR 19 AM 10:58 [Signature]	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Council District 8			
Designated Agency Contact (Name, Title) 200 E. Santa Clara St. 18th Floor		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number 408 535-4908	E-mail Maryanne.groen@sanjoseca.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes ☐ No ☐ Face Value of Each Ticket/Pass \$ 220⁰⁰ / 86⁰⁰

Event Description: Sharks Playoff Date(s) 4, 18, 16 4, 18, 16
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: San Jose Arena Authority
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: _____
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
See Attached	24	S.J. Public Library (D 8 Opening)
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Maryanne Groen Mary Anne Groen Chief of Staff 4/18/16
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

Names	Seats	Sec	Park
Rose Herrera & Matt Wahlin	1,2	B11	X
Kim Nguyen	3	B11	
Patrick Fong	4	B11	
Diep Nguyen	5	B11	
Benjamin Fernandez	6	B11	
Liezel Jackson	7	B11	
Candice Tran	8	B11	
Lisa Valerio	9	B11	
Elizabeth Castaneda	10	B11	
Moises Moreno	11	B11	
Adriana York	12	B11	
Cris Johnson	13	B11	
Yvonne Cabral	14	B11	
Wayne Dore	15	B11	
Jaime Hernandez	16	B11	
Kristy Bell	3	113	
Kelly Hubbard	4	113	
Vidya Kilambi	5	113	
Luis Rodriguez	6	113	
Lenora Morris	9	109	
Austin Carrell	10	109	
Shelley Opsal	7	109	X
Rose Dhaliwal	8	109	